

ACCOMPANIST INFORMATION

Guidelines

Revised 2007

Registration forms will be entered in the order in which they are received. Once an accompanist has reached his/her maximum number of auditions (10), the computer software will no longer allow the accompanist to be scheduled.

Any additional registrations will be scheduled with the accompanist labeled as TBA. You will receive a complete printout of the registration schedule and the assigned accompanists, as well as contact information from those accompanists across the state who have agreed to accept additional assignments.

It will be your responsibility to contact an accompanist who is available and make arrangements for both the rehearsal and the audition of any of your students whose accompanist is listed as TBA. You will need to negotiate the fee privately with the chosen accompanist.

An accompanist may accept additional auditions beyond the maximum of 10, providing that these auditions do not impact the registration schedule. **Under no circumstances will the Registrar change the schedule to accommodate the assigning of additional auditions to an accompanist.** Since it is imperative that the auditions stay on schedule, singers who do not appear on time for their scheduled audition **regardless of the reason** will only be allowed to sing for whatever remaining time is scheduled.

Warning: When accepting additional assignments, the accompanist **MUST** allow time to travel from one location to another. At least **ten minutes** between auditions is strongly recommended.

In this packet you will find another sheet labeled "Accompanist Availability Form." Please help us by providing the names of any accompanists you know who will be willing to take on accompanying responsibilities. Thank you.

ACCOMPANIST AVAILABILITY FORM

Please list below those accompanists who will be willing to accept additional assignments. This information will be sent to all GA NATS members with the final registration schedule. *Please print.*

Return with your registration materials to the Registrar.

Name: _____ Categories qualified to play for: _____

Address: _____ E-mail: _____

_____ Phone: _____

_____ Suggested fee (Optional): _____

Name: _____ Categories qualified to play for: _____

Address: _____ E-mail: _____

_____ Phone: _____

_____ Suggested fee (Optional): _____

Name: _____ Categories qualified to play for: _____

Address: _____ E-mail: _____

_____ Phone: _____

_____ Suggested fee (Optional): _____

Name: _____ Categories qualified to play for: _____

Address: _____ E-mail: _____

_____ Phone: _____

_____ Suggested fee (Optional): _____